

#### Written Testimony

#### Senate Finance Committee

## House Health and Government Operations Committee

## SB 101 / HB 48 Maryland Medical Assistance Program – Collaborative Care Model Services – Implementation and Reimbursement Expansion

January 30, 2023

### **Position: SUPPORT**

Sheppard Pratt thanks the Maryland General Assembly for your longstanding leadership and support of mental and behavioral health providers in Maryland. This testimony outlines the Sheppard Pratt support of SB 101 / HB 48 Maryland Medical Assistance Program – Collaborative Care Model Services – Implementation and Reimbursement Expansion. It is our hope that the Maryland General Assembly vote a favorable report on this legislation.

SB 101 will improve the quality of behavioral health care delivered in primary care settings for Maryland Medicaid recipients by expanding their access to the proven Collaborative Care Model (CoCM).

CoCM is a validated, patient-centered, evidence-based approach for integrating physical and behavioral health care in primary care settings. The model uses a team-based approach to deliver (1) care coordination and management; (2) regular, systematic monitoring and treatment using a validated clinical rating scale; and (3) regular, systematic behavioral health caseload reviews and consultation for patients. CoCM has been validated in over 80 randomized controlled trials and shown to improve health outcomes and save money, mostly via a reduction in unnecessary hospitalization and higher intensity levels of care.

Commercial health insurers in Maryland and Medicare are already reimbursing providers for delivering this model. An ongoing CoCM pilot in the Maryland Medicaid program has demonstrated "clinically significant improvement" in depression and anxiety symptoms for more than 65 percent of participants. It is time to end the pilot and join the 20+ other states that are providing CoCM broadly to their Medicaid recipients.

At Sheppard Pratt, we know that the model will develop universal mental health screening, brief treatment, and psychiatric consultation for those who might otherwise never be identified as needing help.

We stood up a similar model in seven primary care settings. Patients trusted their primary care providers and agreed to meet with a behavioral health provider if referred to behavioral health consultants by their primary care providers. Treatment was often brief and both clinically and cost effective.



Early intervention for depression and substance abuse in a primary care setting can reduce more expensive medical co-morbidities, support whole families, and reduce absenteeism at work.

Clients who are screened in primary care sometimes don't recognize they are suffering from depression, and if they are aware that something is wrong, they frequently have not sought treatment from a specialty behavioral health program because of stigma. Primary care settings have significantly less stigma for those with mild to moderate symptoms.

Sheppard Pratt's partnership with the Greater Baltimore Medical Center (GBMC) has resulted in screening and treatment for patients in GBMC primary care offices. Patients with more serious or chronic mental health diagnoses are referred by the collaborative care teams in primary care practices to specialty mental health providers.

Mental Health America's national data<sup>1</sup> makes it clear that across the country over 56 percent of adults with mental illness receive no treatment. In Maryland 30 percent of adults with mental illness reported that they are not able to receive the treatment they need.

Expanding screening and brief treatment in primary care settings can help close the gap for those who need care, improve the skills of primary care providers, and make mental health care increasingly accessible in a safe and cost-effective model.

This bill will improve behavioral health outcomes, save money, and keep people out of crisis.

Sheppard Pratt urges you to vote a favorable report on SB 101 / HB 48 Maryland Medical Assistance Program – Collaborative Care Model Services – Implementation and Reimbursement Expansion.

# **About Sheppard Pratt**

Sheppard Pratt is the nation's largest private, nonprofit provider of mental health, substance use, developmental disability, special education, and social services in the country. A nationwide resource, Sheppard Pratt provides services across a comprehensive continuum of care, spanning both hospital- and community-based resources. Since its founding in 1853, Sheppard Pratt has been innovating the field through research, best practice implementation, and a focus on improving the quality of mental health care on a global level. Sheppard Pratt has been consistently ranked as a top national psychiatric hospital by *U.S. News & World Report* for nearly 30 years.

<sup>&</sup>lt;sup>1</sup> https://mhanational.org/issues/2022/mental-health-america-adult-data